PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificat	correspondence including below or directed other	g the Patent, advance of erwise in Block 1, by (a	rders and notification of a) specifying a new corre	maintenance fees we espondence address;	vill be ma and/or (l	niled to the current b) indicating a sepa	correspondence address as rate "FEE ADDRESS" fo
CURRENT CORRESPONDE	Fee par	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
700 THIRTEEN SUITE 300	7590 09/16. T & MAYER, LTI TH ST. NW 1, DC 20005-3960		I h Sta adc	Cer ereby certify that th tes Postal Service w dressed to the Mail	tificate of is Fee(s) ' vith suffic Stop 1S	f Mailing or Transı	deposited with the United t class mail in an envelope above, or being facsimile
							(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	3	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/585,513	04/03/2007		Takeharu Ueda)3763/SKY	3674
TITLE OF INVENTION	: ACID LIQUID LEAKA	AGE SENSOR					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0		\$1055	12/16/2011
EXAM	INER	ART UNIT	CLASS-SUBCLASS	7			
SINES, BRIAN J		1772	422-068100	_			
Change of corresponde	ence address or indication	of "Fee Address" (37	2. For printing on the	patent front page, lis	st	. LEYDI	G, VOIT
CFR 1.363). Change of correspondence of corresp	ondence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys			MAYER, LTD.	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or	e of a single firm (having as a member a ttorney or agent) and the names of up to patent attorneys or agents. If no name is			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	7pe)			
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC	_	fied below, no assignee eletion of this form is NO	data will appear on the pT a substitute for filing and (B) RESIDENCE: (CIT	-			ocument has been filed for
		mpany, Limit	ted To	okyo, Japa	in	1)	
	ilities, In		kyo, Japa				
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛱 Co	orporation	or other private gro	up entity 🚨 Government
	o small entity discount p		o. Payment of Fee(s): (Ple A check is enclosed. Payment by credit ca	ard. Form PTO-2038	is attache	ed.	
Advance Order - #	of Copies4	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1216 (enclose an extra copy of this form).					
	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no los				
NOTE: The Issue Fee and	d Publication Fee (if requeecords of the United Sta	nired) will not be accepted tes Patent and Trademark	d from anyone other than Office.	the applicant; a regi	stered atto	orney or agent; or th	e assignee or other party in
							0.011
Authorized Signature	/Jeffrey A					mber 29, 2	2011
Typed or printed nameJeffrey A. Wyand				Registration No. 29, 458			
in application. Confident submitting the completed	iality is governed by 35 I application form to the	U.S.C. 122 and 37 CFR USPTO. Time will vary	1.14. This collection is estable depending upon the indi	stimated to take 12 i vidual case. Any co	minutes to mments o	o complete, including on the amount of tin	by the USPTO to process g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.

Box 1450, Alexandría, Virginia 22 Alexandría, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.